PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1078820

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			40		(Ooldmit 2)		-			OR T			
son							l.	RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ן ו	BASIC FEE	38,5.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			U Ominus 20=		. 20			XS 9=		OR	X\$18=	360	
INDEPENDENT CLAIMS			\(\) minus 3 =		· 2			X43=		OR	X86=	172	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
*	f the difference	e in column 1 is	less than ze	ero, enter	"0" in c	in column 2		TOTAL		OR	TOTAL	13 <i>I</i> V	
CLAIMS AS AMENDED - PART II									L	J 0	OTHER		
		(Column 1)				(Column 3)	SMALL ENTITY				SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		-		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								DIT. FEE	 		ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING		HIGHE	ST				ADDI-	1 [ADDI-	
		AFTER AMENDMENT		PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=		
AME.	Independent	*	Minus	***		= .		X43=	:	OR	X86=	7	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT (CLAIM		\vdash						
							L	145=		OR	+290=		
		•		• • •			ADI	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
		(Column 1)		(Columi		(Column 3)		•	• :			·	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	IR JSLY	PRESENT EXTRA	F		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	(\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	卜	(43=		ŀ	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							···-		OR	700-		
* 16	the entry in solve	nn 1 ic loon than'th	, 	- 0ta	ND 1	-	+	145=		OR	+290=		
 If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL IT. FEE		OR A	TOTAL DDIT. FEE		
· T	he *Highest Num	ber Previously Paid	For (Total or)	SPACE IS I	ess than t) is the h	3, enter "3." lighest number			opriate box				